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r	TOTAL CLAIR	ns i	1	- Icolonai 21			7					ENTITY	
,	FOR			ER FILED	NU			BASIC F			RATE	FEE	
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l,	IDEPENDENT	CLAIMS		minús 3 ≈		•		X43=	-	OF	-		
~	ULTIPLE DEP	ENDENT CLAIM	PRESENT				1			OF	X86≃		
•	If the differen	ce in column 1 i	s less than	zero, enter	~0~ in	column 2	' l	+145=	-	OR	<u> </u>		
	CLAIMS AS AMENDED - PART II								L	OR			
2	14-65 (Column 1) (Column 2) (Column :							SMALL	ENTITY	OR	OTHER SMALL		
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
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5.	1906	(Column 1)		(Column	. 2)	(Column 3)	AD	DIT. FEE	<u> </u>	OR ,	ODOT. FEE		
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ŽQ.	Total	. 36	Minus	-36		= /	 	C\$ 9=	ree	OR	X\$18=	FEE	
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2	ates report format	CLAMS FREMAINING AFTER AMENDMENT	named a state of the same	HIGHES NUMBER PREVIOUS PAID FOR	۱ ۲۷۰۰	PRESENT EXTRASH	, F	ATE:			PATS H.		
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1	FIRST PRESE	NTATION OF MU	LTIPLE DEF	PENDENT CL	AIM		 -	43E		DR -	X86=		
#145= If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										R	+290=	· .	
— प्र 	" If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE)R AD	TOTAL OIT. FEE	—	
T1	The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												
W	TO-875 (Rev. 10/	03)					1001 00	474	4 Otton 14 C		TMENT OF CO	ANSPOR	